SUPPLEMENT

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CONTENTS

PAGE

BRITISH MEDICAL ASSOCIATION

National Health Insurance:

INSURANCE ACTS COMMITTEE: REPORT OF JANUARY MEETING ... 17

INSURANCE MEDICAL SERVICE WEEK BY WEEK ... 19

MEETINGS OF BRANCHES AND DIVISIONS 20

NAVAL AND MILITARY APPOINTMENTS 22

PAGE

ASSOCIATION NOTICES:

SCHOLARSHIPS AND GRANTS 22

BRANCH AND DIVISION MEETINGS TO BE HELD 23

ASSOCIATION INTELLIGENCE AND DIARY 23

DIARY OF SOCIETIES AND LECTURES 23

VACANCIES AND APPOINTMENTS 24

BIRTHS, MARRIAGES, AND DEATHS 24

National Health Insurance

INSURANCE ACTS COMMITTEE

REPORT OF JANUARY MEETING

A meeting of the Insurance Acts Committee was held at the House of the British Medical Association on January 10th. Dr. H. G. Dain was in the chair, and there was a full attendance of members from England and Wales, Scotland, and Northern Ireland.

MORTGAGING OF PRACTICES AND ARRANGEMENTS FOR PURCHASE

The question of the mortgaging of insurance practices and of the possibility of a loan scheme to enable a practitioner to purchase his practice on approved terms was again before the Committee. On a previous occasion the Committee had passed a resolution—but had not carried it further into effect—to amend the regulations so that a practitioner who had given notice of his intention to withdraw from the medical list should not be allowed to absent himself from his practice until the actual removal of his name unless the consent of the Insurance Committee was accorded. The Chairman said that after the resolution had been passed it was represented to him that this, after all, would only touch the fringe of the evil, affecting that small proportion of cases in which the practitioner disappeared. The Ministry of Health had misconceived the intention of the resolution, and the only people who had approved it were the Insurance Committees, to which it gave a limited option ; and even they were not prepared to accept " concurrence " of the Panel Committee in the matter of consent, but only " consultation." He suggested, therefore, that this resolution might well be rescinded, and this was agreed to.

The Lancashire representatives were anxious that some measure should be taken to deal with the undesirable mortgaging of practices, one of them stating that the evil was a growing one in their area, and was producing a type of poverty-stricken practitioner, whose practice was never his own and whose hand was stretched out for half-crowns in any direction. In that way the invasion of the money-lender was undermining the ethics of the profession, and bringing insurance practice into disrepute.

One member of the Committee produced a document which he had received from a firm of money-lenders in which flattering terms were offered, and a letter, duly signed, was quoted from a doctor who expressed himself highly satisfied with his treatment on this his first venture into borrowing. It was the feeling of the Committee that no direct action was possible against corporations which proposed to use their money to finance practices ; the only method was the indirect one of providing proper facilities and letting practitioners know about them. On the question of such facilities it was reported that replies had been received from three insurance corporations to the effect that they were willing to enter into conference, and replies from others were awaited. It was hoped to have definite information from a sufficient number of companies by the next meeting.

APPROVED SOCIETIES AND CERTIFICATION

A report was made to the Committee on a further conference with representatives of groups of approved societies which had taken place on January 3rd, when the general question of certification procedure as it emerged from the Annual Panel Conference was considered. The first question was as to the criteria governing eligibility of an insured pregnant woman for sickness benefit, and here one of the approved societies' representatives had pointed out that some doubt appeared to exist both in the minds of practitioners and of societies as to duration of pregnancy. The phrase " seventh month " or " eighth month " might be ambiguous, because it was not clear whether the beginning or the end of the month was intended. It was therefore proposed that duration of pregnancy should be expressed in weeks, so that instead of saying " seventh month " one might say " thirty weeks," it being understood that the duration was approximate and not necessarily an accurate statement. The Committee agreed to this amendment.

The conference had next come to the question of a statement on the certificate as to fitness for alternative occupation. The original proposal, which was withdrawn for further consideration at the Panel Conference, was that when the time approached that a patient appeared fit for some employment, though not for the resumption of his previous occupation, this fact might be intimated by the practitioner to the society ; but there were objections in some quarters on the ground of possible infringement of professional secrecy. Eventually, at the renewed conference with the approved societies it was agreed that in each case where a patient would soon become fit to resume some work, though remaining unfit to resume his previous occupation, the practitioner should indicate this opinion by inserting in the " remarks " column of the certificate the words "?alternative employment."

The Chairman pointed out that there was no compulsion to make this remark, and that the remark could

not be regarded as infringing professional secrecy. After some discussion the feeling of the Committee was evident that this should be confined to those cases in which the insured person would be permanently unfit to follow his previous occupation, and with this limitation the proposal was agreed to. It was also agreed to intimate this to the approved societies, who had perhaps supposed that it might have a wider connotation. The Chairman also said that by this means something would be done to diminish the number of referred cases, and it was just as well to bear in mind, to forestall future criticisms, that as a probable result a larger proportion of the smaller number referred would be found fit for work.

The intermediate convalescent certificate had also engaged the attention of the conference. This was a certificate of which apparently very little use was made by approved societies, yet extremely stringent conditions were attached to it, and practitioners were in danger of being brought before medical service tribunals on points which administratively did not signify. The societies' representatives had pointed out that whether an insured person went away at the end of fourteen days' or twenty-eight days' incapacity, and was resident in a convalescent home, they were satisfied with a statement from the matron or other officer as to residence, and did not require a medical certificate as such. The experience of members of the Committee, however, was that of their own insured patients who went away for convalescence the greater number did not go to institutions. The feeling of the Committee was that the intermediate convalescent certificate should be retained, but an attempt should be made to improve its usefulness and to alter either the rules or the wording of the certificate, so that a practitioner should not be placed in an awkward position for a merely technical breach.

The other main question which had been considered at the conference was that of special certificates for long and chronic cases. It was stated that there was a tendency on the part of practitioners to regard the issue of a special intermediate or "monthly" certificate as being a convenient method of saving the trouble of issuing weekly certificates in cases of long illness. The approved societies' representatives had undertaken to collect information upon the issues arising out of the excessive use of monthly certificates. One of them had stated that in from 20 to 25 per cent. of cases in which certification was taking place such monthly certificates were being issued. The Chairman said that it seemed worth while to make some attempt to regularize the position when information became available.

On the general subject of these proposals, the Chairman explained that when the decisions were completely agreed they would be forwarded to the Ministry of Health with a request that they be placed before the Approved Societies' Consultative Council, and they would be, if desired, the subject of conference between representatives of the societies and of practitioners on the one hand, and of the Ministry on the other. Effect would be given to them, it was hoped, by a circular letter from the Ministry as well as by recommendation from the two bodies of representatives concerned to their respective constituents.

CHARGING OF FEES TO INSURED PERSONS

The now rather prolonged discussion on the amendment of Clause 7 (3) of the terms of service, which relates to the charging of fees to insured persons under a misapprehension, was resumed. The immediate question, left over from the last Panel Conference, is whether a practitioner should be given the right to say whether he will have any case under this clause dealt with by a subcommittee of the Insurance Committee, and, if so, whether by the Medical Benefit or the Medical Service Subcommittee. One of the Middlesex representatives, in whose county the question had arisen in a rather acute form, asked who was to determine under the clause as it stood whether there had been a genuine misapprehension on the part of the doctor in charging a fee or sending in an account. In a Middlesex case there had been a prolonged controversy with the Insurance Committee concerning a practitioner who had said that he was under no misapprehension as to the position of the patient, but maintained that he had a right to make a charge for the service. The Insurance Committee had said that he had no such right, and accordingly withheld money under this clause. The strict wording of the clause as submitted to the last Panel Conference gave chapter and verse for such an attitude on the part of the Insurance Committee. What it was desired to secure was that in such a case as described the practitioner should have the right to have the matter determined by the Medical Service Subcommittee. It was a point which arose only rarely, and in most insurance areas not at all.

The Chairman suggested that the only real difficulty remaining with regard to the amended clause was that, in stating "that the action of the doctor in presenting an account or charging a fee was due to a genuine misapprehension," it failed to indicate what the misapprehension was about, and he proposed that the words be inserted, ". . . misapprehension as to the insurance status of the patient." In that way nothing else than misapprehension as to the position of the patient could be dealt with under the clause.

The Committee agreed to recommend these limiting words to the Panel Conference. One member desired to add that the clause should not apply to any case in which the practitioner objected to withdrawing the account or refunding the fee, and in such circumstances the matter should be referred to the Medical Service Subcommittee, but the Chairman said that they could not possibly expect to get that from anybody.

SURGICAL SPIRIT

The question of the prescribing of surgical spirit was again considered. The statement on methylated spirit in prescribing, which appeared in the *Supplement* of December 22nd, 1934, was before the Committee, with the intimation that the next edition of the *National Formulary* would probably specify that acetone-free spirit should be used for all formulae unless otherwise directed by the prescriber. Subsequently to this a letter had been received from the Ministry of Health on the interpretation to be placed upon the term "surgical spirit" when used in national health insurance prescriptions, and enclosing a draft of an explanatory circular proposed to be issued to Insurance Committees, Panel and Pharmaceutical Committees, and Pricing Bureaux. The essential part of the circular was:

"Where the term 'surgical spirit' is used in a prescription without qualification it should be interpreted to mean the formula under spiritus antisepticus in the *National Formulary, 1933*. Where the term 'surgical spirit No. 1' or 'surgical spirit No. 2' is used in a prescription, it should be interpreted to mean formula No. 1 or formula No. 2, as the case may be, under 'spiritus chirurgicalis' in the *British Pharmaceutical Codex, 1934*."

It was also pointed out that spiritus antisepticus (surgical spirit) of the *National Formulary* might be supplied only on the prescription of a medical practitioner.

OTHER BUSINESS

There were laid before the Committee the Ministry's comments upon the resolutions of the Panel Conference concerning collective arrangements by insured persons for receiving medical treatment through a hospital or similar institution; also, from the Department of Health for Scotland, a statement as to the arrangements made for the supply of "temporary resident" medical treatment to "institutional own arrangers." The Chairman said that in Scotland they had followed a different line and had sent up a temporary residents' "pool." But the arrangements had been made after consultation with the Insurance Acts Subcommittee for Scotland, as well as the Scottish Association of Insurance Committees, and he did not think it mattered so far as the rest of the country was concerned. With regard to the Ministry's comments on the general question, he drew attention to the point that an Insurance Committee was bound to see, when people contracted out, that the treatment so secured was "not inferior in nature, quality, or extent."

The Manchester Panel Committee drew attention to what it described as an increasing number of insured persons

who were suspended from medical benefit in error by approved societies. It was stated that a large number of such errors occurred in Lancashire. The Insurance Acts Committee, however, felt that it could not move in the matter on the mere assertion, but must await evidence of what was alleged.

The question of the position of a practitioner who had been asked to supply dressings for an insured patient of his who was being treated in hospital was raised by a London representative. The Chairman said that the position was quite clear. An insurance practitioner was liable to provide drugs or dressings for any treatment he himself was carrying out, and if a patient, having been under the care of a hospital, came back to him for treatment, he must prescribe what was necessary. But if the patient remained under hospital treatment it was not open to the practitioner to supply dressings to be applied by someone else not under his direction. The hospital should supply what was necessary while it was treating the patient, and the insurance practitioner was under no liability to supply material for treatment by someone other than himself or his deputy acting under his instructions.

Surrey Panel Committee forwarded a memorandum on the constitution of the group of which it is a part (the other counties being Kent and Sussex) for the election of two direct representatives on the Insurance Acts Committee, and drew attention to certain inequalities existing in the group. The Chairman said that the Committee itself would have no objection to an alteration in the basis of representation if it was agreed in the areas concerned, but if it was contested by any of the constituent Panel Committees it would be a matter for more detailed inquiry.

The Chairman of the Committee and the Chairman of the Conference (Dr. H. G. Dain and Dr. H. C. Jonas), with Dr. P. V. Anderson, Dr. H. J. Cardale, and Dr. W. G. Thwaites were appointed representatives of the Committee to talk over various matters with the Ministry.

The probable absence during the early autumn of officers and prominent members of the Association who will be attending the Melbourne Meeting led to a proposal, which was agreed to, to hold the Annual Panel Conference in November instead of October.

THE DEFENCE TRUST FUND

The Committee resolved itself into the National Insurance Defence Trust, the main business of which was to receive a report presented by Mr. Bishop Harman, the Treasurer, on "backward" areas—namely, areas, six in number, which have never subscribed to the Fund, and forty areas which have not subscribed during the last three years. A number of the latter, however, since the report was prepared, had sent contributions or promises. It was felt that nothing more could be done in the case of the few areas which presented a stolid negative than to remind them from time to time of their obligations, and it was agreed to decide at the September meeting how much of the report should be presented to the Conference.

It was also reported that correspondence had taken place with the secretary of the Central Insurance Practitioners in Northern Ireland with a view to an invitation to practitioners in that country to subscribe. The difficulty of collection is greater there owing to the non-existence of Panel Committees, and there is also the feeling that any statement of the objects of the Trust has echoes of battles long ago, whereas the practitioners in Northern Ireland came into national insurance at a later date. At the same time it was admitted that owing to those old battles fought in Great Britain, practitioners in Northern Ireland had been able to enter the service on even better terms than their colleagues on the other side of the North Channel. Apparently the desire of the representatives of Northern Ireland on the Committee was for a more succinct statement of the objects of the Trust Fund than the comprehensive one first submitted from the office of the Association; and it was agreed that they should themselves edit it in a form and compass likely to appeal to their fellow countrymen, the central office to have a final oversight in order to ensure that the statement included the minimum legally necessary.

THE INSURANCE MEDICAL SERVICE WEEK BY WEEK

Surgical Spirit

With reference to the note which recently appeared in this column with regard to the interpretation of the term "surgical spirit" when ordered on an official prescription, the Insurance Acts Committee is informed that the Minister of Health, after consultation with the Commissioners of Customs and Excise, has decided to issue an explanatory circular to Insurance Committees, Panel and Pharmaceutical Committees, and Pricing Bureaux. The circular will make it clear that where the term "surgical spirit" is used in a prescription without qualification it should be interpreted to mean the formula under spiritus antisepticus in the *National Formulary, 1933*. On the other hand, where the term "surgical spirit No. 1" or "surgical spirit No. 2" is used in a prescription, it should be interpreted to mean formula No. 1 or formula No. 2, as the case may be, under spiritus chirurgicalis in the *British Pharmaceutical Codex, 1934*.

Temporary Residents: A Portsmouth Memorandum

The Panel Conference, 1933, passed a resolution remitting to the Insurance Acts Committee an inquiry into the system of payment of temporary residents, and a memorandum was issued. The Portsmouth Panel Committee have directed that the following report be submitted upon the position locally:

1. Each Insurance Committee notifies to the Central Medical Distribution Committee how many temporary residents from other committees are treated annually in its area. A system of debit and credit is hence arrived at locally as follows:

Year	Portsmouth "Ins"	Portsmouth "Outs"
1930	1,120	503
1931	998	503
1932	1,036	505
1933	1,096	591
1934	1,129	(not yet available)

2. The Medical Distribution Committee assesses each temporary resident as 4 units—the unit being one quarter's capitation fee—that is, 2s. approximately. Portsmouth in 1934 will, therefore, receive 1,129 × 8s. = £451 12s.

3. Portsmouth, however, while receiving from the Central Fund 4 units per patient, pays the Portsmouth doctor 7 units—that is, £790 6s.

4. The difference or "loss"—that is, £338 14s. for 1934—will be found by the ninety-six doctors on the panel in proportion to the strength of their panel lists.

5. Temporary residents are not distributed proportionally to panel lists. They fall mostly into the "holiday-maker" area at East Southsea. For instance, eight doctors with one-tenth of the whole panel have nearly one-quarter of the temporary residents; in other words, the eight doctors are taking £51 in 1934 from the remaining eighty-eight doctors. And this happens year after year.

6. To view the position equitably it is also necessary to ascertain what services were actually rendered to these patients. From January 1st, 1934, to November 26th, 1934, a careful record has been kept, and after allowing 4d. for the cost of medicine, may be calculated as follows:

Number of patients, 729 (continuation cards returned)

		£	s.	d.
Attendances at surgery ...	1,981 at 2s. 2d. =	214	12	0
Visits to home	558 at 3s. 2d. =	88	7	0
Certificates	1,077 at 1s. 0d. =	53	17	0
		£356	16	0

This works out at 9s. 9d. per temporary resident—that is, equals 5 units approximately. The above basis could be subjected to various loadings and unloadings, but the figure of 9s. 9d. would not be materially altered. The fee now paid is 15s. per temporary resident.

7. The capitation fees in 1934 worked out at 2s. 6d. per script.

8. The Panel Committee is to consider whether the present figure of 7 units per temporary resident should be retained or another figure adopted.

Medical Records

The decisions of the Annual Conference in regard to medical records have been communicated to the Ministry of Health with a request that any necessary action to give effect thereto should be taken. A reply has been received stating that, before arriving at any decision regarding the proposals, the Ministry desire that they should be discussed between the Insurance Acts Committee and representatives of the Department.

Own Arrangements" by Insured Members of Staffs of Institutions

Copies of the minutes of the annual conference on this subject having been forwarded to the Minister of Health with a request for the Ministry's comments thereon, the following reply has been received:

"I am directed by the Minister of Health to refer to Dr. Forbes's letter of November 26th, 1934, on the subject of resolutions passed by the recent Panel Conference concerning insured persons participating in collective arrangements for receiving medical treatment through a hospital or similar institution.

"With regard to the first resolution, I am to say that, as the Insurance Acts Committee is doubtless aware, Insurance Committees are authorized under the National Health Insurance Act, 1924, to allow insured persons, in lieu of receiving medical benefit under arrangements made by the Committee, to make their own arrangements for receiving medical attendance and treatment. While under the existing regulations it would not be open to the Minister to impose a condition that before collective arrangements are permitted the institution must accept responsibility for the cost of treatment obtained by an insured person while temporarily absent from the institution, he considers that an Insurance Committee might properly decline to accept the arrangements as sufficient to secure treatment 'not inferior in nature, quality, or extent' (Clause 3 (2) of the Fourth Schedule to the Medical Benefit Regulations), in the absence of arrangements for securing treatment and attendance free of charge for an insured person temporarily absent from the institution. It is understood that such a condition has, in fact, been accepted by institutions in some Insurance Committee areas. In other cases the Minister understands that Insurance Committees have found institutions willing, on a case being brought to their notice, to defray the medical expenses incurred by an employee while temporarily absent from the hospital.

"I am to add that so far as the Minister is aware, the above arrangements, together with the alternative method referred to in your letter, have prevented serious difficulties in the past, but if the Insurance Acts Committee has knowledge of any difficulties having arisen in particular areas, the Minister would be prepared to communicate with the Insurance Committees concerned."

The letter from the Department is not sufficient to clear up the difficulty which has arisen, because the form of undertaking which is required to be signed by the medical practitioner responsible for the insured person's treatment (in this case the medical officer of the institution) contains the following footnote: "Any further expenditure incurred by the insured person—for example, during temporary absence from home—would have to be borne by the insured person."

So long as this note remains on the form, the institution might disclaim responsibility for the medical treatment of any member of the staff while absent from the institution. The note should therefore be deleted from the form of undertaking where the form is used for collective arrangements in the case of the staff of a hospital or other medical institution. In view of the Ministry's letter, it may be assumed that there would be no objection to this being done in appropriate cases—that is, where it would conflict with the condition imposed by the Insurance Committee.

Meetings of Branches and Divisions

BIRMINGHAM BRANCH: COVENTRY DIVISION

A clinical meeting of the Coventry Division was held at the Coventry and Warwickshire Hospital on December 4th, 1934, when cases were demonstrated by Dr. A. H. LAIRD, Mr. D. A. P. MACALISTER, and Dr. A. J. WILSON.

CAMBRIDGE AND HUNTINGDON BRANCH: PETERBOROUGH DIVISION

A joint meeting of the Peterborough Division and the Peterborough Medical Society was held at Peterborough on November 28th, 1934, when two films, "The Science and Art of Obstetrics" and "The Treatment of Colles's Fracture," were shown by the courtesy of Petrolagar Laboratories.

A business meeting followed, when Dr. J. W. COLLINS was in the chair and fourteen members were present. An antenatal scheme for submission to the town council was discussed and approved, and a resolution regarding the salaries of whole-time public health officers was unanimously adopted. The meeting also agreed, after consideration of a letter from the local secretary of the Manchester Unity Friendly Society, that members of that society should be treated on terms similar to those paid by the National Deposit Friendly Society, and that all practitioners in the town should be given the opportunity of providing such treatment. The grouping of the Division for election of a representative to the Representative Body was approved.

ESSEX BRANCH: SOUTH ESSEX DIVISION

A meeting of the South Essex Division was held at Westcliff-on-Sea on December 11th, 1934, when Dr. R. SELLS was in the chair and twenty-five members were present. At the invitation of the Division there were also present some fifteen members of the Westcliff-on-Sea Branch of the Chartered Society of Massage and Medical Gymnastics. The meeting first considered the proposal of the Central Council that the Division should adopt the resolution regarding the salaries of whole-time public health medical officers; this was carried by twenty votes to one, there being twenty-two members present at that time.

Mr. G. PERKINS then gave an address on "Bone-setting." After questions had been asked a hearty vote of thanks to Mr. Perkins for his interesting address was proposed by Dr. B. BLAXILL, seconded by Dr. JOAN L. LUSH, and carried with acclamation.

GIBRALTAR BRANCH

The annual dinner of the Gibraltar Branch was held at the Assembly Rooms on November 22nd, 1934, when the president, Major J. C. DOWSE, R.A.M.C., was in the chair and fourteen members were present, Lieut.-Col. Allnutt attending as a guest.

The sixty-fourth meeting of the Branch was held at the Branch room on December 6th. Major DOWSE was in the chair and ten members were present. Major C. B. C. ANDERSON, R.A.M.C., read an interesting paper on "The Treatment of Minor Rectal Conditions," in which he described his experiences in the treatment of haemorrhoids and fissures by means of injections. He favoured a solution consisting of 5 parts of phenol and 95 parts of ol. amygdalae dulc., with 4 grains of menthol to the ounce; injecting the mucous membrane immediately above the pile; and repeating the injection once a week until the desired result was obtained. Major Anderson stated that the results of treatment in properly selected cases were most satisfactory. In his series of fifty cases the condition had recurred within a year in only fifteen. He injected fissures with A.B.A. solution, and the results had been excellent. He had treated ten cases without any recurrences.

A lively discussion ensued, during which Dr. GIRALDI stated that he had treated a number of cases of piles with phenol injections, and his experiences concurred with the lecturer's. Dr. DEALE favoured treatment by operation. The meeting terminated with a hearty vote of thanks unanimously accorded Major Anderson for his useful exposition of the subject.

HERTFORDSHIRE BRANCH: BARNET DIVISION

A a dinner-meeting of the Barnet Division was held at Hadley Wood Golf Club on December 11th, 1934, when Dr. A. DE ST. L. F. PERIGAL was in the chair.

Dr. A. H. DOUTHWAITE gave an address on "Pyrexia of Obscure Origin." A full discussion followed, and a hearty vote of thanks was accorded Dr. Douthwaite for his address.

HERTFORDSHIRE BRANCH: ST. ALBANS DIVISION

A meeting of the St. Albans Division was held on November 14th, 1934, when there was a good attendance.

The following officers were elected for 1934–5:

Chairman, Dr. J. W. Rammell. *Vice-Chairman*, Dr. R. Blair Kinloch. *Honorary Secretary and Treasurer*, Dr. W. A. Fraser. *Charities Secretary*, Dr. R. E. Wilson.

Dr. SIDNEY H. CLARKE then opened a discussion on "Death Certification," which proved very interesting. An instructive debate followed.

Mr. D. S. MORGAN JONES described a case of chronic encapsulating peritonitis, and referred to the literature on the subject.

KENT BRANCH: ISLE OF THANET DIVISION

A meeting of the Isle of Thanet Division, preceded by a dinner, was held at Canterbury on November 29th, 1934, when some thirty-five members were present.

The formation of a provident scheme in the area was discussed. The SECRETARY pointed out that the public already realized the necessity for such a scheme, and the various hospitals would very soon realize that in it lay an increased source of income through their private wards. Hospitals would produce their own schemes; these would be competitive one with another, and would thus be damaging to the interests of the profession. The profession, however, must forestall this by producing a scheme satisfactory to the public and to the hospitals. He also pointed out that under the scheme general practitioners not on hospital staffs would have facilities of working and remuneration equal to those of men on hospital staffs. There was a very full discussion, and by a large majority it was decided that a subcommittee should be appointed to report upon the scheme in detail.

METROPOLITAN COUNTIES BRANCH: CAMBERWELL DIVISION

A general meeting of the Camberwell Division was held at Constance Road Institution on December 11th, 1934, when Dr. R. KELSON FORD was in the chair, and nineteen members and two guests from other Divisions were present.

After due consideration of the memorandum of recommendations in regard to salaries of whole-time public health medical officers, the following resolution was put by the CHAIRMAN:

> That in the opinion of the Camberwell Division no medical practitioner should, after the date of adoption of this resolution, apply for, or accept, any whole-time public health appointment within the area of the Division under a local authority which is not applying the memorandum of recommendations in regard to salaries of whole-time public health medical officers, as approved and adopted by the Annual Representative Meeting, 1929.

The resolution was carried unanimously by show of hands, there being no dissentients.

A very interesting address on "Coroners' Courts" was then given by Dr. W. H. WHITEHOUSE, who dealt with such varying aspects of the subject as the psychology of juries, the differential diagnosis of food poisoning and acute arsenical poisoning, and the question of medical men seeking to become coroners.

Dr. ARTHUR DAVIES showed some specimens, including a mummified baby which was found in a trunk, and demonstrated two cases of acute suffocation produced by the lodgement of a toy rubber balloon and a shrimp in the trachea.

A hearty vote of thanks to Dr. Whitehouse and Dr. Davies was carried unanimously.

METROPOLITAN COUNTIES BRANCH: KENSINGTON DIVISION

A meeting of the Kensington Division was held at Paddington Hospital on December 18th, 1934, when Dr. T. C. HUNT spoke on "Some Types of Nervous Indigestion and Their Treatment."

METROPOLITAN COUNTIES BRANCH: SOUTH-WEST ESSEX DIVISION

A meeting of the South-West Essex Division was held at Leyton on December 11th, 1934, when the vice-chairman, Dr. J. L. MCKENZIE BROWN, was in the chair.

A suggested syllabus of post-graduate courses to be held at the British Post-Graduate Medical School, Hammersmith, was read and criticism invited. The chief feeling of the Division was that Hammersmith was much too far for doctors to attend from East London, and that such courses in the neighbourhood of the Division would be welcome.

A letter from the Metropolitan Counties Branch was read, pointing out a resolution which had been passed by the Branch Council to the effect that facilities for immunization against diphtheria should be available to the public through medical practitioners without attendance at any particular clinic. Dr. A. T. W. POWELL stated that in Walthamstow the serum was available for general practitioners wishful to use it, but he was of opinion that the Schick test should be carried out at a clinic under the care of those well experienced in the interpretation of the reactions.

Dr. C. H. PANTING then told the meeting that as a result of recommendations from the members of the honorary medical staff to the Connaught Hospital Council, expressing their wish to collaborate with practitioners and not to divorce doctors from their patients, the council had adopted the following resolutions:

> That the resident medical and nursing staff be notified that: (*a*) Patients are admitted to private wards subject to the general rules of the hospital. (*b*) Each patient is under the care of a member of the honorary staff. (*c*) Medical practitioners are allowed free access to their patients, and are invited to participate in treatment. They may be present or assist at operations.

Some discussion on these proposals followed, and the secretary was asked to write to the Connaught Hospital expressing the thanks of the members for this step, and assuring the hospital staff that the practitioners would do their best to co-operate in this matter. It was understood that the house-physician or house-surgeon would not visit the private patients according to the new arrangement unless in emergency or asked by the general practitioner to do so.

Mr. W. MCKIM MCCULLAGH then gave a lecture on "Modern Improvement in Midwifery Practice." He touched upon induction, being more in favour of the use of drugs than of operative procedure, the value of episiotomy, the necessity for a practical knowledge of blood transfusion in emergency cases, the use of glycerin drainage, etc. The lecture was rendered more practical and interesting by the demonstration of instruments and apparatus, and a discussion followed. On the motion of Dr. HELEN M. JARDINE, seconded by Dr. F. SANDERS, a vote of thanks was accorded Mr. McCullagh for his address.

NORTH OF ENGLAND BRANCH: BLYTH AND MORPETH DIVISIONS

A joint meeting of the Blyth and Morpeth Divisions was held at Blyth on December 7th, 1934. After supper there was a discussion on the (Draft) Memorandum on Post-Graduate Instruction for General Practitioners. It was agreed that the Division approve the memorandum and the additions and comments made by the Northumberland Panel Committee, with an added request that provision be made for instruction in ante-natal care and examination.

Petrolagar Laboratories Ltd. lent a film on "The Art and Science of Obstetrics," by Dr. DeLee (Chicago), which was projected by Dr. C. F. FAIRLIE and much appreciated.

Dr. D. REVIE (Morpeth Division) moved a vote of thanks to the Blyth Division for their hospitality.

NORTHERN IRELAND BRANCH

The opening meeting of the session of the Northern Ireland Branch was held at Belfast on November 22nd, when Dr. J. ARMSTRONG was in the chair.

Before introducing his successor, Dr. Armstrong referred to the decision of the Central Council to recommend the acceptance of the invitation of the Branch to hold the Annual Meeting of the British Medical Association in Belfast in 1937; this was received with hearty applause. Dr. Armstrong thanked the members and officers for their support during the past year, and wished Professor P. T. Crymble a most successful term of office.

Professor CRYMBLE then delivered an address on "The Abdominal Surgery of Children," in which he said that appendicitis, hypertrophic stenosis of the pylorus, intussusception, Meckel's diverticulum, and obstructions of the bowel were the main surgical conditions. The diagnosis and pathology of the chronic appendix were fully discussed, and the results of a follow-up of fifty-nine cases were given. Of these, thirty-nine patients had been completely relieved of their symptoms, nine had not replied to the questionary, and ten had not been completely relieved. Of the latter, one was found subsequently to have a renal calculus, two were much improved, three had a normal appendix removed, and four were unchanged. A number of paintings illustrating the various appendicular conditions were thrown on the screen by the epidiascope. These showed the appearances at operation of the mucous membrane changes, and of the various kinks and other obstructions which the appendix may undergo. On the motion of Mr. H. L. H. GREER a hearty vote of thanks was accorded Professor Crymble for his exposition of the subject of his address. This was seconded by Dr. LYLE and passed with acclamation.

NORTHERN IRELAND BRANCH: TYRONE DIVISION

A meeting of the Tyrone Division was held at Omagh on December 6th, 1934, when Dr. G. F. V. LEARY was in the chair and thirteen members were present. The following officers were elected:

Representative in Representative Body, Dr. W. Lyle. *Deputy Representative in Representative Body*, Dr. Leary.

It was decided to send the following resolution to the Ministry of Home Affairs: "That a preparation of ipecacuanha, preferably the tincture, be placed on the prescribed list of medicines."

The Divisional programme for 1935 was discussed, and the dates of four meetings were fixed.

A resolution was passed again calling attention to the very inadequate fee for certifying persons of unsound mind.

SUFFOLK BRANCH: SOUTH SUFFOLK DIVISION

A meeting of the South Suffolk Division was held at the East Suffolk and Ipswich Hospital on November 16th, 1934, when Dr. D. W. RYDER RICHARDSON was in the chair and twenty-four members were present.

Mr. R. CHARLES demonstrated a number of interesting cases in the surgical wards of the hospital. After tea Dr. HELENA WRIGHT spoke on "Contraceptive Technique in Medical Practice." She discussed the various pessaries at present in use and the method of their employment, and also the different chemicals that have been on the market, explaining the mode of their action and the reasons for their failure. She said that birth control clinics in which the work was conscientiously done were of great assistance in the early diagnosis of serious lesions. Where the methods that she advocated were carried out the percentage of failures was 5. A hearty vote of thanks was accorded Dr. Wright for her address, on the motion of Miss C. F. WILLIAMSON; this was seconded by Dr. A. CLOUDESLEY SMITH, who pointed out that this was the first time a lady had delivered a lecture to the Division.

SURREY BRANCH: KINGSTON-ON-THAMES DIVISION

A meeting of the Kingston-on-Thames Division was held at the Kingston and District Hospital on December 4th, when Mr. N. E. WATERFIELD was in the chair.

Dr. THOMAS HUNT gave an interesting paper on "Recent Advances in the Treatment of Kidney Disease." Dr. Hunt drew attention to the frequency of acute nephritis following streptococcal throats, and suggested that the general practitioner should in such cases make a urinary examination three weeks after with a view to early detection. He stressed the different aetiology and consequent treatment of nephritis arising in the essential hypertension of young people, arteriosclerosis, and chronic nephritis, and concluded with an account of the use of hypertonic intravenous glucose in the treatment of acute nephritis with complete suppression.

Naval and Military Appointments

ROYAL NAVAL MEDICAL SERVICE

Surgeon Captains F. J. D. Twigg and G. D. G. Ferguson to the *President*, for course; K. H. Hole to the *President*, for Medical Depot, Royal Victoria Yard, Deptford.

Surgeon Commander L. W. Gemmell is placed on the retired list.

Surgeon Commanders E. Moxon-Browne to the *Victory*, for Royal Marines Infirmary, Portsmouth; F. St. B. Wickham to the *St. Vincent*; A. G. Malcolm to the *Pembroke*, for Sheerness Dockyard; H. H. Babington to the *President*, for Medical Department, Admiralty.

Surgeon Lieutenant Commanders R. C. Foster to the *Malabar*; J. G. Maguire to the *Ganges*, for Royal Naval Sick Quarters, Shotley; W. G. C. Fitzpatrick to the *Pembroke*, for Chatham Hospital.

Surgeon Lieutenants W. A. S. Grant to the *Medway*; J. G. M. Nisbett to the *Sandpiper*; H. L. Belcher to the *Tarantula*; J. W. Rhys to the *Penzance*; S. K. Foster to the *Drake*, for Royal Naval Barracks.

ROYAL NAVAL VOLUNTEER RESERVE

Probationary Surgeon Sublieutenant D. Shute to be Surgeon Sublieutenant, seniority January 4th, 1934.

D. S. Macphail has entered as Probationary Surgeon Sublieutenant, and is attached to List 2 of the East Scottish Division.

ROYAL ARMY MEDICAL CORPS

Major J. M. Pinkerton, M.C., relinquishes his temporary commission and retains his rank.

Captain T. L. O'C. Ryan resigns his commission.

Captain J. C. Gilroy is restored to the establishment.

ROYAL AIR FORCE MEDICAL SERVICE

Wing Commanders J. Rothwell to R.A.F. General Hospital, Palestine and Transjordan, for duty as Commanding Officer; H. S. C. Starkey, O.B.E., to Headquarters, R.A.F., Mediterranean, Malta, for duty as Principal Medical Officer, vice Wing Commander D'A. Power, M.C.

Squadron Leader D. G. Boddie to No. 4 Flying Training School, Abu Sueir, Egypt, for duty as Medical Officer.

Flight Lieutenant L. I. Hyder to be Squadron Leader.

Flight Lieutenants H. C. S. Pimblett to Princess Mary's R.A.F. Hospital, Halton; J. H. Cullinan to R.A.F. Hospital, Cranwell.

ROYAL AIR FORCE RESERVE: MEDICAL BRANCH

Flight Lieutenant V. V. Brown relinquishes his commission on completion of service.

SUPPLEMENTARY RESERVE OF OFFICERS

ROYAL ARMY MEDICAL CORPS

Lieutenants R. M. A. Ormston, P. R. Wheatley, and W. F. de C. Veale to be Captains.

TERRITORIAL ARMY

Colonel P. J. Gaffikin, M.C., vacates the appointment of A.D.M.S., 44th (Home Counties) Division on completion of tenure.

ROYAL ARMY MEDICAL CORPS

Major and Brevet Lieut.-Col. R. A. Lennie, T.D., to be Lieutenant-Colonel.

Major V. H. Wardle, M.C., T.D., to be Lieutenant-Colonel.

H. C. Stewart to be Lieutenant.

TERRITORIAL ARMY RESERVE OF OFFICERS: ROYAL ARMY MEDICAL CORPS

Major F. B. Mackenzie, D.S.O., M.C., T.D., from Territorial Army Reserve of Officers (4th/5th Battalion Royal Scots), to be Major.

INDIAN MEDICAL SERVICE

The services of Major C. M. Nicol are placed temporarily at the disposal of the Government of the Punjab for employment as Assistant Director of Public Health.

COLONIAL MEDICAL SERVICES

The following appointments are announced: A. J. Board, M.B., Ch.B., Medical Officer, Northern Rhodesia; J. C. Niven, M.B., Ch.B., Malaria Research Officer II, Institute of Medical Research, Federated Malay States; W. M. Chambers, M.D., Deputy Director of Medical and Health Services, Straits Settlements; R. L. Cheverton, M.R.C.S., L.R.C.P., Senior Medical Officer, Falkland Islands; S. W. T. Lee, M.B., B.Ch., B.A.O., Senior Medical Officer, Zanzibar; J. I. Moir, M.B., Ch.B., D.P.H., Principal Medical Officer, British Honduras.

Association Notices

SCHOLARSHIPS AND GRANTS IN AID OF SCIENTIFIC RESEARCH

Scholarships

The Council of the British Medical Association is prepared to receive applications for Research Scholarships as follows: an Ernest Hart Memorial Scholarship, of the value of £200 per annum, a Walter Dixon Scholarship, of the value of £200 per annum, and three Research Scholarships, each of the value of £150 per annum. These Scholarships are given to candidates whom the Science Committee of the Association recommends as qualified to undertake research in any subject (including State Medicine) relating to the causation, prevention, or treatment of disease. Preference will be given, other things being equal, to members of the medical profession. Each Scholarship is tenable for one year, commencing on October 1st, 1935. A Scholar may be reappointed for not more than two additional terms. A Scholar is not necessarily required to devote the whole of his or her time to the work of research, but may hold a junior appointment at a university, medical school, or hospital, provided the duties of such appointment do not interfere with his or her work as a Scholar.

Grants

The Council of the British Medical Association is also prepared to receive applications for Grants for the assistance of research into the causation, treatment, or prevention of disease. Preference will be given, other things being equal, to members of the medical profession and to applicants who propose as subjects of investigation problems directly related to practical medicine.

Conditions of Award: Applications

Applications for Scholarships and Grants must be made not later than Saturday, May 11th, 1935, on the prescribed form, a copy of which will be supplied on application to the Medical Secretary of the Association, B.M.A. House, Tavistock Square, London, W.C.1. Applicants are required to furnish the names of three referees who are competent to speak as to their capacity for the research contemplated.

BRANCH AND DIVISION MEETINGS TO BE HELD

BERKS, BUCKS, AND OXFORD BRANCH: OXFORD DIVISION.—At Radcliffe Infirmary, Oxford, Wednesday, January 23rd, 2.30 p.m. Dr. H. N. Bradbrooke: "Use of Quinine in Obstetrics." Dr. W. Duigan and Dr. Elizabeth Handfield-Jones: "Anaesthesia in Obstetrics."

BIRMINGHAM BRANCH.—Meeting of Pathological and Clinical Section at Queen's Hospital, Birmingham, Friday, January 25th.

DERBYSHIRE BRANCH: BUXTON DIVISION.—At Spa Hotel, Buxton, Thursday, January 24th, 3.15 p.m. Dr. Robert Forbes (Deputy Medical Secretary): "A State Medical Service and its Alternatives."

DUNDEE BRANCH.—At Physiology Classroom, Medical School, University College, Small's Wynd, Dundee, Wednesday, January 23rd, 8.30 p.m. Dr. F. K. Kerr: "The Edinburgh Public Medical Service."

EAST YORKSHIRE BRANCH.—At Hull Royal Infirmary, Friday, February 1st. Evening clinical meeting.

ESSEX BRANCH: MID-ESSEX DIVISION.—At Chelmsford and Essex Hospital, Thursday, January 31st, 8 p.m. Film: "The Science and Art of Obstetrics."

GLASGOW AND WEST OF SCOTLAND BRANCH: AYRSHIRE DIVISION.—At Kilmarnock, Friday, January 25th. Film: "The Science and Art of Obstetrics."

HERTFORDSHIRE BRANCH: BARNET DIVISION.—At Wellhouse Hospital, Barnet, Tuesday, January 22nd, 8.30 p.m. Discussion: "Anaesthetics in Midwifery." To be opened by Dr. J. E. Elam. Drs. Stewart, Segar, and Vatcher will also speak.

LANCASHIRE AND CHESHIRE BRANCH: HYDE DIVISION.—At Hyde Town Hall, Friday, January 25th, 9 p.m. Dr. Robert Forbes (Deputy Medical Secretary): "Whither General Practice?" All medical practitioners in Hyde and Ashton districts invited.

LANCASHIRE AND CHESHIRE BRANCH: SALFORD DIVISION.—At Victoria Hotel, Manchester, Thursday, January 31st, 8.30 p.m. Dinner and dance.

LANCASHIRE AND CHESHIRE BRANCH: SOUTHPORT DIVISION.—At 52, Hoghton Street, Southport, Friday, January 25th, 8.30 p.m. Divisional meeting.

LANCASHIRE AND CHESHIRE BRANCH: WIGAN DIVISION.—At Rendezvous Café, Standishgate, Wigan, Tuesday, January 22nd, 8.30 p.m. Mr. Hugh Reid (Liverpool): "Haematuria."

LINCOLNSHIRE BRANCH: SCUNTHORPE DIVISION.—At Scunthorpe War Memorial Hospital, Thursday, February 7th, 8.30 p.m. Dr. H. C. Barlow: "Diabetes."

METROPOLITAN COUNTIES BRANCH: CITY DIVISION.—At Metropolitan Hospital, Kingsland Road, E., Friday, January 18th, 4.30 p.m. Mr. R. A. Ramsay: Surgical cases.

METROPOLITAN COUNTIES BRANCH: HARROW DIVISION.—Joint clinical meeting with Hendon Division at Redhill Hospital, Edgware, Tuesday, January 22nd, 8.45 p.m.

METROPOLITAN COUNTIES BRANCH: KENSINGTON DIVISION.—At Princess Beatrice Hospital, Richmond Road, S.W., Friday, January 18th, 8.45 p.m. Clinical meeting. Demonstration of the human oddities and freaks appearing at the Olympia Circus, including giraffe-necked ladies, leopard-skinned women, the ostrich man, and a 24-year-old woman who is two feet in height. All medical practitioners are invited to attend.

METROPOLITAN COUNTIES BRANCH: MARYLEBONE DIVISION.—At 11, Chandos Street, W., Wednesday, February 13th, 8.30 p.m. Film: "The Science and Art of Obstetrics."

NORTHERN IRELAND BRANCH: TYRONE DIVISION.—At Tyrone County Hospital, Thursday, January 24th, 4.30 p.m. Special lecture on "Gynaecology" by C. H. G. Macafee.

SUFFOLK BRANCH: NORTH SUFFOLK DIVISION.—At Hotel Victoria, Lowestoft, Thursday, February 14th, 8.15 p.m. Dinner meeting. Dr. Charles Hill (Assistant Medical Secretary): "Effects of Recent Legislation on Medical Practice."

SUSSEX BRANCH: BRIGHTON DIVISION.—Joint meeting with Sussex Law Society at Grand Hotel, Brighton, Thursday, January 24th, 8.15 p.m. Mr. Geoffrey Lawrence: "Some Aspects of Drunkenness and its Relation to the Criminal Law." Preceded by supper at 7.30 p.m.

YORKSHIRE BRANCH: BRADFORD DIVISION.—At Prince's Ballroom, Midland Hotel, Bradford, Wednesday, January 23rd. Annual Divisional and charities dinner-dance.

British Medical Association

OFFICES, BRITISH MEDICAL ASSOCIATION HOUSE
TAVISTOCK SQUARE, W.C.1

Departments

SUBSCRIPTIONS AND ADVERTISEMENTS (Financial Secretary and Business Manager. Telegrams: Articulate Westcent, London).
MEDICAL SECRETARY (Telegrams: Medisecra Westcent, London).
EDITOR, BRITISH MEDICAL JOURNAL (Telegrams: Aitiology Westcent, London).
Telephone numbers of British Medical Association and British Medical Journal, Euston 2111 (internal exchange, four lines).

SCOTTISH MEDICAL SECRETARY: 7, Drumsheugh Gardens, Edinburgh. (Telegrams: Associate, Edinburgh. Tel.: 24361 Edinburgh.)
IRISH MEDICAL SECRETARY: 18, Kildare Street, Dublin. (Telegrams: Bacillus, Dublin. Tel.: 62550 Dublin.)

Diary of Central Meetings

JANUARY

23 Wed. **Council, 10 a.m.**
29 Tues. **Committee on Medical Aspects of Abortion, 3 p.m.**

FEBRUARY

1 Fri. **Physical Medicine Group Committee, 3 p.m.**
8 Fri. **Science Committee, 2 p.m.**

DIARY OF SOCIETIES AND LECTURES

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—*Mon.*, 5 p.m., Professor T. Pomfret Kilner, Transplantation of Skin. *Wed.*, 5 p.m., Professor Laurence O'Shaughnessy, Surgery of the Lung Root. *Fri.*, 5 p.m., Professor Macdonald Critchley, The Morphology of the Cerebro-spinal Arteries and their Clinical Significance.

ROYAL SOCIETY OF MEDICINE

Section of Medicine.—Tues., 5 p.m. Discussion: Diagnosis of Diseases of the Stomach. Opener, Dr. Izod Bennett. Other speakers: Dr. Maurice Shaw and Dr. M. A. Arafa (Cairo), who will demonstrate his film of "Gastroscopy."

Section of Comparative Medicine.—Wed., 5 p.m. Discussion: Haemoglobinuria. Openers, Professor J. R. Barcroft, Professor F. C. Minett, and Dr. Hamilton Fairley.

Section of Urology.—Thurs., 8.30 p.m. Discussion: Treatment of Ureteric Calculi. Openers, Mr. Henry Wade, Mr. J. G. Yates Bell.

Section of Disease in Children.—Fri., 5 p.m. (Cases at 4.30 p.m.)

Section of Epidemiology and State Medicine.—Fri., 8.30 p.m. Paper by Dr. H. E. Magee: Assessment of the State of Nutrition.

ROYAL INSTITUTION, 21, Albemarle Street, W.—*Thurs.*, 5.15 p.m. Professor H. Hartridge: Recent Advances in Vision and Hearing.

ST. JOHN'S HOSPITAL DERMATOLOGICAL SOCIETY, 49, Leicester Square, W.C.—*Wed.*, 4.30 p.m., Meeting. 5 p.m., Dr. R. R. Wettenhall: The Practice of Dermatology in Melbourne, Australia.

POST-GRADUATE COURSES AND LECTURES

FELLOWSHIP OF MEDICINE AND POST-GRADUATE MEDICAL ASSOCIATION, 1, Wimpole Street, W.—*National Hospital for Diseases of the Heart*, Westmoreland Street, W.: All-day Special Post-Graduate Course in Cardiology. *St. Peter's Hospital*, Henrietta Street, W.C.: All-day Special Post-Graduate Course in Advanced Urology. *National Temperance Hospital*, Hampstead Road, N.W.: Surgical Tutorial Classes—Tues., 8 p.m., Mr. R. C. Brock, Injuries to Bones; Thurs., 8 p.m., Mr. T. Holmes Sellors, Thorax. *Wellcome Museum of Medical Science*, Euston Road, N.W.: Thurs., 3 p.m., Demonstration of Electrocardiograms by Dr. William Evans. *Medical Society of London*, 11, Chandos Street, W.: Wed., 8.30 p.m., Electrocardiograms (Interpretation of Tracings) by Dr. Kenneth Harris; Fri., 4.15 p.m., Lecture on Vomiting, by Dr. Clark-Kennedy. *Panel of Teachers:* Individual clinics in medicine and surgery are available daily. Courses, clinics, etc., are open only to members and associates of the Fellowship (with the exception of the cardiology course).

CANCER HOSPITAL, Fulham Road, S.W.—*Thurs.*, 4 p.m., Mr. Cecil Joll, Diagnosis and Treatment of Cancer of the Stomach.

CENTRAL LONDON THROAT, NOSE AND EAR HOSPITAL, Gray's Inn Road, W.C.—*Fri.*, 4 p.m., Mr. Lowndes Yates, Treatment of Deafness.

HOSPITAL FOR EPILEPSY AND PARALYSIS, Maida Vale, W.—*Thurs.*, 3 p.m., Clinical Meeting. Demonstration by Dr. Wilfred Harris.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—*Mon.*, 12 noon, Laboratory Demonstration, Dr. D. N. Nabarro, Congenital Syphilis, General Consideration. *Wed.*, 2 p.m., Lecture, Dr. W. N. Pearson, Vomiting in Infancy. *Thurs.*, 12 noon, Laboratory Demonstration, Dr. A. G. Signy, Laboratory Tests for Congenital Syphilis. *Fri.*, 12 noon, Lecture, Mr. L. E. Barrington-Ward, Congenital Abnormalities of the Intestine. Out-patient clinics, mornings, 10 a.m. to 12 noon. Ward visits, afternoons, 2 p.m. to 3.30 p.m. (except Wed.).

KING'S COLLEGE HOSPITAL MEDICAL SCHOOL.—*Thurs.*, 9 p.m., Mr. Yates Bell, Some Interesting Misdiagneses.

LONDON SCHOOL OF DERMATOLOGY, St. John's Hospital, 49, Leicester Square, W.C.—*Tues.*, 5 p.m., Dr. R. T. Brain, Psoriasis. *Thurs.*, 5 p.m., Dr. W. N. Goldsmith, Pigmentary Disorders.

WEST LONDON HOSPITAL POST-GRADUATE COLLEGE, Hammersmith, W.—*Daily*, 2 p.m., Operations, Medical and Surgical Clinics. *Mon.*, 10 a.m., Medical Wards, Skin Clinic; 2 p.m., Surgical and Gynaecological Wards, Eye and Gynaecological Clinics; 4.15 p.m., Lecture, Mr. Green-Armytage, Endocrine Dysfunction in Gynaecology and Obstetrics. *Tues.*, 10 a.m., Medical Wards; 11 a.m., Surgical Wards; 2 p.m., Throat Clinic; 4.15 p.m., Lecture, Dr. Konstam, Cardiac Arrhythmias. *Wed.*, 10 a.m., Children's Ward and Clinic; 2 p.m., Medical Wards, Eye Clinic; 4.15 p.m., Dr. Archer, Biochemical Demonstration. *Thurs.*, 10 a.m., Neurological and Gynaecological Clinics; 11 a.m., Fracture Clinic; 2 p.m., Eye and Genito-Urinary Clinics. *Fri.*, 10 a.m., Skin Clinic; 12 noon, Lecture on Treatment; 2 p.m., Throat Clinic; 4.15 p.m., Lecture, Mr. Simpson-Smith, Abdominal Injuries. *Sat.*, 10 a.m., Medical Wards, Children's and Surgical Clinics. The lectures at 4.15 p.m. are open to all medical practitioners without fee.

GLASGOW POST-GRADUATE MEDICAL ASSOCIATION.—At Faculty Hall, 242, St. Vincent Street: *Tues.*, 3.30 p.m., Dr. Ivy McKenzie, Some Unusual Forms of Cerebral Thrombosis. At Royal Maternity and Women's Hospital: *Wed.*, 4.15 p.m., Professor James Hendry, Obstetrical Cases.

LEEDS POST-GRADUATE CLINICAL DEMONSTRATIONS.—At Leeds General Infirmary: *Tues.*, 3.30 p.m., Mr. Black, Early Diagnosis of Glaucoma (with cases).

LEEDS PUBLIC DISPENSARY AND HOSPITAL POST-GRADUATE COURSE.—*Wed.*, 4 p.m., Dr. H. H. Moll, Management of Pulmonary Tuberculosis.

LIVERPOOL UNIVERSITY CLINICAL SCHOOL ANTE-NATAL CLINICS.—Royal Infirmary: *Mon.* and *Thurs.*, 10.30 a.m. Maternity Hospital: *Mon.*, *Tues.*, *Wed.*, *Thurs.*, and *Fri.*, 11.30 a.m.

SALFORD MUNICIPAL CLINIC (V.D.).—*Mon.*, 3.30 p.m., Dr. Burke, Syphilis, Diagnosis, Clinical and Serological. *Thurs.*, 3.30 p.m., Dr. Burke, Syphilis, Remedial Agents, Arsenicals.

VACANCIES

ASHTON-UNDER-LYNE: DISTRICT INFIRMARY.—H.S.

BELFAST: ROYAL VICTORIA HOSPITAL.—Seven vacancies on Resident Medical Staff. Males.

BIRKENHEAD AND WIRRAL CHILDREN'S HOSPITAL.—(1) H.S. (2) Second H.S.

BIRMINGHAM: CHILDREN'S HOSPITAL.—Assistant R.M.O. and Assistant Pathologist.

BIRMINGHAM CITY.—Whole-time Assistant M.O (female) for Maternity and Child Welfare.

BIRMINGHAM AND MIDLAND EYE HOSPITAL.—R.S.O.

BRADFORD ROYAL INFIRMARY.—(1) H.P. (2) H.S. Males, unmarried.

BRITISH POST-GRADUATE MEDICAL SCHOOL, Hammersmith, W.—Two non-resident First Assistants.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE HEART AND LUNGS, Victoria Park, E.—H.P. (male).

DARLINGTON MEMORIAL HOSPITAL.—(1) H.S. for Aural and Ophthalmic Department. (2) H.S. for Casualty and Orthopaedic Department. (3) H.S. for Surgical Department. (4) H.P. Males.

EAST HAM MEMORIAL HOSPITAL, Shrewsbury Road, E.—(1) R.M.O. (2) H.P. Males.

EASTBOURNE: PRINCESS ALICE MEMORIAL HOSPITAL.—R.H.S. (male).

EDINBURGH: ROYAL EDINBURGH HOSPITAL FOR SICK CHILDREN.—(1) Hon. Assistant P. (2) Hon. Assistant S.

EDMONTON URBAN DISTRICT COUNCIL.—M.O.H.

ELIZABETH GARRETT ANDERSON HOSPITAL, Euston Road, N.W.—Assistant Radiologist.

ELY: COUNTY OF THE ISLE OF ELY.—Assistant County M.O.H. and Assistant School M.O. (male).

EVELINA HOSPITAL FOR SICK CHILDREN, Southwark, S.E.—(1) Fourth P. (2) H.P. (male).

GRIMSBY AND DISTRICT HOSPITAL.—(1) Senior H.S. (2) J.H.S.

GROCERS' COMPANY, E.C.—Three Medical Research Scholarships.

HERTFORD COUNTY HOSPITAL.—Senior H.S. (male).

HERTFORDSHIRE COUNTY COUNCIL.—A.M.O. (male, unmarried) at County Sanatorium, Ware Park.

HOPITAL ET DISPENSAIRE FRANCAIS, Shaftesbury Avenue, W.C.—J.R.M.O. (male, unmarried).

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—Assistant Director of Radiological Department.

HOSPITAL OF ST. JOHN AND ST. ELIZABETH, 60, Grove End Road, N.W.—R.H.P. (male).

HULL ROYAL INFIRMARY.—(1) H.S. to Ophthalmic and Ear, Nose, and Throat Departments. (2) C.O. Males. (3) Hon. Anaesthetist.

ILFORD: KING GEORGE HOSPITAL.—(1) C.O. (2) H.P. (3) H.S. Males. (4) Hon. Dermatologist.

LONDON COUNTY COUNCIL.—(1) Senior A.M.O. (Grade II) at Paddington Hospital. (2) A.M.O. (Grade II) at (*a*) Dulwich Hospital, (*b*) Highgate Hospital, (*c*) St. Benedict's Hospital, Tooting, (*d*) Queen Mary's Hospital, Sidcup, (*e*) Constance Road Institution, East Dulwich, and (*f*) Holborn and Finsbury Institution. All males, except (*e*). (3) A.M.O. (Grade I), male, at St. Luke's Hospital, Lowestoft. (4) Full-time Physicist in hospital service.

LONDON LOCK HOSPITAL, 91, Dean Street, W.—Surgical Registrar (male).

LIVERPOOL CITY.—R.A.M.O. at Fazakerley Sanatorium (Tuberculosis).

LIVERPOOL UNIVERSITY AND LIVERPOOL MATERNITY HOSPITAL.—Obstetric Assistant and Tutor.

MANCHESTER CITY.—A.M.O's. (Grade 3, males, unmarried) at Crumpsall Hospital.

NEWCASTLE-UPON-TYNE: HOSPITAL FOR SICK CHILDREN.—(1) H.P. (2) H.S.

PADDINGTON GREEN CHILDREN'S HOSPITAL, W.—Clinical Assistant to Medical Out-patients.

PADDINGTON METROPOLITAN BOROUGH.—Visiting M.O. to "Toddlers" Consultation.

PRINCE OF WALES'S GENERAL HOSPITAL, Tottenham, N.—(1) Hon. Anaesthetist for Tonsillectomy Cases. (2) Hon. Clinical Assistant.

QUEEN CHARLOTTE'S MATERNITY HOSPITAL, Marylebone Road, N.W.—Obstetric S. to Out-patients.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.—Assistant P.

ROTHERHAM HOSPITAL.—(1) Senior H.S. (2) H.P. Males.

ROYAL DENTAL HOSPITAL OF LONDON, 32, Leicester Square, W.C.—(1) Hon. Assistant Anaesthetist. (2) Part-time House Anaesthetist (non-resident).

ROYAL MASONIC HOSPITAL, Ravenscourt Park, W.—R.M.O. (male).

ROYAL NATIONAL ORTHOPAEDIC HOSPITAL, Great Portland Street, W.—(1) H.S. (male, unmarried) at Brockley Hill Branch, Stanmore. (2) Hon. Radiologist.

ST. JOHN'S HOSPITAL FOR DISEASES OF THE SKIN, 49, Leicester Square, W.C.—Two Hon. Assistant P.

SALISBURY: GENERAL INFIRMARY.—H.P. (male, unmarried).

SEAMEN'S HOSPITAL SOCIETY, Greenwich, S.E.—Anaesthetist at Dreadnought Hospital, Greenwich.

SOMERSET COUNTY COUNCIL.—Medical Superintendent (male) for Sandhill Park, Bishops Lydeard, near Taunton.

SOUTHAMPTON: FREE EYE HOSPITAL.—H.S.

STOKE-ON-TRENT: NORTH STAFFORDSHIRE ROYAL INFIRMARY.—H.S.

WALLASEY: VICTORIA CENTRAL HOSPITAL.—(1) Senior H.S. (2) J.H.S. Males.

CERTIFYING FACTORY SURGEON.—The appointment at Old Deer (Aberdeenshire) is vacant. Applications to the Chief Inspector of Factories, Home Office, Whitehall, S.W.1, by January 29th.

This list is compiled from our advertisement columns, where full particulars are given. To ensure notice in this column advertisements must be received not later than the first post on Tuesday mornings. Further unclassified vacancies will be found in the advertising pages.

APPOINTMENTS

MANCHESTER ROYAL INFIRMARY.—*Chief Assistant to Gynaecological Department:* R. Newton, M.D., M.C.O.G. *Senior House-Surgeon to Central Branch:* T. S. Heslop, M.B., Ch.B.

WEST LONDON HOSPITAL, Hammersmith, W.—*House-Physician:* C. F. R. Briggs, M.B., B.S. *House-Surgeons:* F. Felix Rundle, M.S., B.S.; Alan Bowen-Davies, M.B., B.Ch. *Resident Anaesthetist:* Bernard Coden, M.B., Ch.B.

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BIRTHS, MARRIAGES, AND DEATHS

The charge for inserting announcements of Births, Marriages, and Deaths is 9s., which sum should be forwarded with the notice not later than the first post on Tuesday morning, in order to ensure insertion in the current issue.

BIRTH

SAVIN.—On January 10th, at 174, Sutherland Avenue, W.9, the wife of L. H. Savin, M.D., M.S., M.R.C.P., F.R.C.S., of a son.

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